PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

920673-94835

Eliconve dandary 1, 2000												
		CLAIMS AS	S FILED - PART I (Column 1) (Co					SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			6					RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			6 minus 20=		*	D		X\$ 9=		OR	X\$18=	0
INDEPENDENT CLAIMS			<i>)</i> m	ninus 3 =	*	d		X42=	,	OR	X84=	2
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	. 2
* If the difference in column 1 is less than zero, enter "0"						olumn 2		TOTAL		OR.	TOTAL	
CLAIMS AS AMENDED - PART II								TOTAL		Ora	OTHER	THAN
		(Column 1)	(Column 2) (Column			(Column 3)	SMALL ENTITY			OR		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE ·	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1	X\$ 9=		OR	X\$18=	
	Independent	*	Minus			=		X42=		OR	X84=	
<u></u>	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		1	+140=		OR	+280=	
TOTAL											TOTAL	
ADDIT. FEEON ADDIT. FEE												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AIM	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							J	+140=		OR	+280=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
_	-	(Column 1)		(Colu		(Column 3)	Ģ.,					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		3	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDE				T CLAIM]	7,42-		OR	7042	
*	If the entry in early	mn 1 is less than 1	ha amini to :	hime 0	- 102 :	h 0		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" In column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The Highest Nur	imber Previously P nber Previously Pa	alo For IN Ti id For" (Total	or Independ	is less tha lent) is the	an 3, enter "3." e highest numb			propriate box			